



Attorney Docket No. CA919990047US1/1796P

**CERTIFICATE OF MAILING**

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\_\_\_\_\_  
Sandra D. Hunter

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In Re Application of:

Date: April 11, 2005

Matthew A. HURAS

Confirmation No.: 7317

Serial No.: 09/774,202

Group Art Unit: 2162

Filed: January 29, 2001

Examiner: Alam, Shahid Al

For: ONLINE DATABASE TABLE REORGANIZATION

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**RESPONSE TO RESTRICTION REQUIREMENT**

Sir:

In response to the Restriction Requirement mailed March 10, 2005, Applicant hereby elects Group III, Claims 30-33, 44-46, 57-59, with traverse.

Applicant traverses the restriction of Groups I, II, and III. For example, Group II and Group III recite a method for reorganizing a database table online. Group III claims steps including a vacate move step and a fill move step. Group II claims steps that similarly include a vacate move step and a fill move step. The Group II claims also recite clean up steps that additionally define the invention, but these Groups are sufficiently similar to be

examined in one patent application.

In addition, Group I and Group II both recite a method for reorganizing a database table online. Group I recites moving records and and using reorganization pointers, and Group II recites move steps for relocating records using temporary pointers. Both Groups recite constraints related to scanner processes. These Groups therefore are sufficiently similar to be examined in one application.

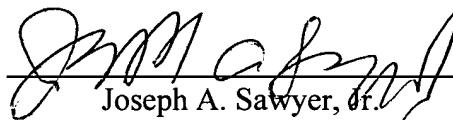
Should the Examiner believe that a telephone conference would expedite the prosecution of this application, the undersigned can be reached at the telephone number set out below.

Respectfully submitted,

SAWYER LAW GROUP LLP

April 11, 2005

Date



Joseph A. Sawyer, Jr.  
Attorney for Applicant(s)  
Reg. No. 30,801  
(650) 493-4540

## TRANSMITTAL FORM

Attorney Docket No.  
CA919990047US1  
1796PIn re the application **HURASIPE** Confirmation No: 7317

Serial No: 09/774,202 Group Art Unit: 2162

Filed: January 29, 2001 Examiner: Alam, Shahid Al

For: Online Database Table Reorganization

## ENCLOSURES (check all that apply)

|                                     |  |   |  |                                     |   |
|-------------------------------------|--|---|--|-------------------------------------|---|
| <input type="checkbox"/>            | Amendment/Reply  | <input type="checkbox"/>  | Assignment and Recordation Cover Sheet           | <input type="checkbox"/>            | After Allowance Communication to Group      |
|                                     | <input type="checkbox"/> After Final                         | <input type="checkbox"/>  | Part B-Issue Fee Transmittal                     | <input type="checkbox"/>            | Notice of Appeal                            |
| <input type="checkbox"/>            | Information disclosure statement                             | <input type="checkbox"/>  | Letter to Draftsman                              | <input type="checkbox"/>            | Appeal Brief                                |
|                                     | <input type="checkbox"/> Form 1449                           | <input type="checkbox"/>  | Drawings   | <input type="checkbox"/>            | Status Letter                               |
|                                     | <input type="checkbox"/> (X) Copies of References            | <input type="checkbox"/>  | Petition   | <input checked="" type="checkbox"/> | Postcard                                    |
| <input type="checkbox"/>            | Extension of Time Request *                                  | <input type="checkbox"/>  | Fee Address Indication Form                      | <input type="checkbox"/>            | Other Enclosure(s) (please identify below): |
| <input type="checkbox"/>            | Express Abandonment  | <input type="checkbox"/>  | Terminal Disclaimer                              |                                     |   |
| <input type="checkbox"/>            | Certified Copy of Priority Doc                               | <input type="checkbox"/>  | Power of Attorney and Revocation of Prior Powers |                                     |   |
| <input checked="" type="checkbox"/> | Response to Restriction Requirement                          | <input type="checkbox"/>  | Change of Correspondence Address                 |                                     |   |
| <input type="checkbox"/>            | Response to Missing Parts                                    | *Extension of Term: Pursuant to 37 CFR 1.136, Applicant petitions the Commissioner to extend the time for response for xxxxx month(s), from _____ to _____. |  |                                     |   |
|                                     | <input type="checkbox"/> Executed Declaration by Inventor(s) |   |  |                                     |   |

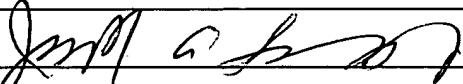
## CLAIMS

| FOR                | Claims Remaining After Amendment | Highest # of Claims Previously Paid For | Extra Claims | RATE       | FEE     |
|--------------------|----------------------------------|---|--------------|------------|---------|
| Total Claims       | 0                                | 0                                       | 0            | \$ 50.00   | \$ 0.00 |
| Independent Claims | 0                                | 0                                       | 0            | \$200.00   | \$ 0.00 |
|                    |                                  |   |              | Total Fees | \$ 0.00 |

## METHOD OF PAYMENT

|                                     |   |
|-------------------------------------|---|
| <input type="checkbox"/>            | Check no. _____ in the amount of \$ _____ is enclosed for payment of fees.                                    |
| <input type="checkbox"/>            | Charge \$ _____ to Deposit Account No. _____ (Account Holder Name) for payment of fees.                       |
| <input checked="" type="checkbox"/> | Charge any additional fees or credit any overpayment to Deposit Account No. <u>02-2120</u> (Sawyer Law Group) |

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

|               |   |
|---------------|---|
| Attorney Name | Joseph A. Sawyer, Jr., Reg. 30,801  |
| Signature     |  |
| Date          | April 11, 2005  |

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on April 11, 2005

Type or printed name Saundra D. HunterSignature 